KOLAR Document ID: 1483806

	WELL R			WWC-5				ion of Wat							
	l Record			e in Well Use				rces App. I	1	The section N such	Well ID	N. N			
1 LOCATION OF WATER WELL:			Fraction		Section Number			Township Numb T S		ige Number					
County: 1/4 1/4 1/4 2 WELL OWNER: Last Name: First:							Duro	$\frac{T S R \Box E \Box W}{\text{ral Address where well is located (if unknown, distance and}}$							
								rection from nearest town or intersection): If at owner's address, check here:							
Address:									rection nom nearest town of intersection). If at owner's address, eneck here.						
Address:															
City:		I	State:	ZIP:				1							
3 LOCATE WELL WITH WY IN 4 DEPTH OF COMPLETED WELL:							. ft.	5 Latit	nde.			(decimal degrees)			
WITH "X" IN SECTION BOX: 4 DEFTH OF CONFILETED WELL: Depth(s) Groundwater Encountered: 1)															
	N 2) ft. 3) ft., or 4) \Box						ry Well Datum: □ WGS 84 □ NAD 83 □ NAD 27								
	WELL'S STATIC WATER LEVEL:						Boulee for Eathlade, Eoligitade.								
		 below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) 								unit make/model:					
NW	NE	Pump test data: Well water was ft.					······ (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			(0)					
w	Е	after hours pumping								e Mapper:					
	-Xse	Well water was ft.													
SW	-ASE	after hours pumping					6 Elevation:ft. Ground Level TOC								
		Estimated Y	C 1												
	S nilel	Bore Hole Diameter: in. to					$\Box Other \dots$								
Image:															
1. Domestic:															
☐ Household 6. ☐ Dewatering: how many wells?										: well ID					
				echarge: well ID				Cased Uncased Geotechnical			1				
	Livestock 8. Monitoring: well ID														
2. 🗌 Irrigati				al Remediation: w						Loop Horizont					
3. Feedlot Air Sparge					Extraction		b) Open Loop \Box Surface Discharge \Box Inj. of Water								
4. Industrial Recovery Injection 13. Other (specify):															
Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box No If yes, date sample was submitted:															
				C D Other		CA	SING		z. 🗆] Glued 🔲 Clamped		d 🗖 Threadad			
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No															
	SCREEN OR									8					
□ Steel															
□ Brass □ Galvanized Steel □ None used (open hole)															
SCREEN OR PERFORATION OPENINGS ARE:															
	nuous Slot red Shutter	☐ Mill Slot		• •						Other (Specify)	•••••				
		Key Punch						ne (Open H		ft., From	ft to	ft			
										ft., From					
										ft. to					
	rce of possible			potential source o											
Septic '			Lateral Line					ivestock Pe			cide Storage				
Sewer]			Cess Pool	□ Sewag				uel Storage			oned Water				
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well															
☐ Other (Specify) Direction from well? ft.															
10 FROM	TO		ITHOLO			FROM		TO		THO. LOG (cont.) or		G INTERVALS			
						_			<u> </u>						
						Notes:	1		1						
11 CONT	RACTOR'S	OR LAND	WNER'S	S CERTIFICAT	TIO	N: This w	ater v	well was [onstructed, 🗌 reco	onstructed,	or plugged			
under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.															
	Kansas Water Well Contractor's License No														
	under the business name of														
	nent of Health a	nd Environment,	Bureau of W							eka, Kansas 66612-136	7. Telephone				
Visit us at h	ttp://www.kdhel	s.gov/waterwel	/index.html								KS	SA 82a-1212			